### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State of Florida

# COOPERATIVE ARRANGEMENTS WITH STATE HEALTH AND STATE VOCATIONAL REHABILITATIVE AGENCIES AND WITH TITLE FIVE GRANTEES

### The following agreements are attached:

- 1. Agreement between the Medicaid Office, Economic Services Program Office, Children Youth and Families Program Office, Children's Medical Services Program Office, Developmental Services Program Office and the State Health Office for Early and Periodic Screening, Diagnosis and Treatment of Medicaid Eligible Children under 21. (Part I).
- 2. Cooperative Agreement between the Department of Health and Rehabilitative Services, the Medicaid Program Office and the Department of Labor and Employment Security, the Division of Vocational Rehabilitation. (Part II).
- 3. Agreement between the Medicaid Office and the Department of Highway Safety and Motor Vehicles. (Part III).
- 4. Agreement between the Medicaid Office and the Office of Licensure and Certification. (Part IV).
- Agreement between Medicaid Office and Developmental Services Office. (Part V).
- 6. Agreement between the Medicaid Office and the Office of Licensure and Certification. (Part VI).
- 7. Agreement between the Medicaid Office, the State Health Office and the Economic Services Program Office. (Part VII).
- 8. Agreement between the Medicaid Office and the Alcohol, Drug Abuse and Mental Health Program Office. (Part VIII).
- 9. Agreement between the Medicaid Office and the Aging and Adult Services Program Office. (Part 1X).
- 10. Agreement between the Medicaid Office and the Department of Education. (Part X).
- 11. Agreement between the Department of Health and Rehabilitative Services and the Department of Labor and Employment Security. (Part XI).
- 12. Memorandum of agreement between the State Health Office and the Medicaid Program Office regarding the Healthy Start Initiative. (Part XII).
- 13. Agreement between HRS offices and the Agency for Health Care Administration for the utilization control program. (Part XIII).

Amendment 93-11
Effective 1/1/93
Supersedes 93-1092-49
Approved JIN 28 1993
Revised Submission 5-6-93

## STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

AGREEMENT BETWEEN THE MEDICAID OFFICE,

ECONOMIC SERVICES PROGRAM OFFICE,
CHILDREN, YOUTH, AND FAMILIES PROGRAM OFFICE,
CHILDREN'S MEDICAL SERVICES PROGRAM OFFICE,
DEVELOPMENTAL SERVICES PROGRAM OFFICE,
ALCOHOL, DRUG ABUSE AND MENTAL HEALTH PROGRAM OFFICE
AND THE

STATE HEALTH OFFICE,

FOR

EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT OF MEDICAID ELIGIBLE CHILDREN UNDER 21

The Medicaid office (PDDM) is designated as the administering office for the Title XIX (Medicaid) Program in the state of Florida; the Economic Services Program Office (PDES) has responsibility for the administration of categorical assistance programs, including the Title IV-A program; the Children, Youth, and Families Program office (PDCYF) has responsibility for the Children's Emergency Shelter, Foster Care, and Adoption Programs; the Children's Medical Services Program office (PDCM) under statutory Authority and the Maternal and Child Health Block Grant provides diagnosis and treatment to children with chronic health conditions; the State Health office (PDHE) has statutory responsibility for statewide supervision of the administration of health services programs in county public health units; the Developmental Services Program office (PDDS) has responsibility for training, residential care and related services for children and adults with developmental disabilities; and the Alcohol, Drug Abuse and Mental Health Program Office (PDADM) has responsibility for the provision of a continuum of outpatient, community-based mental health care through contractul agreements with local community Mental Health Centers. Therefore, the programs agree to the following:

### I. All Coordinating Headquarters Program Offices

Ensure that the EPSDT screen is utilized as the initial health care assessment for all EPSDT eligible children served by the department.

Ensure the EPSDT screening and treatment services are utilized for the provision of preventive and primary health care for all EPSDT eligible children served by the department.

Coordinate with the Medicaid Program office on issuance of policy guidelines, training and monitoring procedures regarding the EPSDT program.

Serve on a statewide EPSDT coordinating committee with the function of providing technical assistance and statewide coordination of the EPSDT program.

Share applicable child health information, reports and statistical data with coordinating program offices.

Coordinate with the Medicaid program office in the development of Medicaid reimbursable services which promote a continuum of health care for children in the least restrictive, most cost effective setting possible.

Abide by federal regulations pertaining to confidentiality and the disclosure of information regarding Medicaid applicants and eligible recipients as outlined in Section IX of this agreement.

### II. Headquarters Medicaid Program Office

Provide through Florida's Medicaid fiscal agent and the office of Medicaid contract management, monthly reports of EPSDT recipients informed of services, due screenings, screened and requiring treatment. Reports will be distributed monthly to the district Medicaid program office.

Coordinate with Economic Services to ensure that eligible individuals are issued a valid Medicaid ID card.

Ensure that reimbursement is made to eligible providers based upon correct billing procedures as outlined in the appropriate provider handbook.

Ensure that program regulations, instructions and billing guidelines are issued to all program office staff, district staff and providers.

Serve as liaison among all offices involved in the EPSDT program.

Ensure through coordination with Headquarters Economic Services; Children, Youth and Families; State Health Office; Children's Medical Services; Developmental Services; and Alcohol, Drug Abuse and Mental Health offices that procedures for

EPSDT case management as mandated by federal regulations are implemented.

Ensure that training in EPSDT screening, treatment, and case management services is provided to district Medicaid program office staff and providers.

Coordinate the development of district procedures for EPSDT case management to ensure that parents, guardians, and eligible individuals are informed of the availability of initial and periodic screening services and that arrangements are made for eligible individuals to receive these services, as well as needed support services. Information should also be provided on the benefits of screening and follow-up diagnostic and treatment services.

Ensure that EPSDT subsystem informing letters are developed and mailed to recipients in accordance with EPSDT informing standards.

Share applicable screening data and statistical reports with coordinating program offices.

Coordinate EPSDT special projects with other social service agencies, county health units and other program offices.

Develop and disseminate EPSDT outreach materials to recipients, district staff, providers and community groups in accordance with federal EPSDT regulations.

### III. Headquarters Economic Services Program Office

Ensure that eligibles are issued a valid Medicaid ID card.

Ensure that the recipient eligibility file is accurate and up-to-date.

Ensure that all newly approved Aid to Families with Dependent Children (AFDC) Public Medical Assistance, AFDC-related medically needy recipients and those reapproved after a period of ineligibility are advised of the availability of initial and periodic screening services in accordance with procedures outlined in the EPSDT District Procedures Guide.

Ensure that the assistance payments' indicator regarding EPSDT referrals is accurate and up-to-date for each newly eligible, reapproved or reenrolled Public Assistant recipient. The indicator should be completed as follows:

Y = Yes, acceptance of EPSDT services
N - No, refusal of EPSDT services

## IV. Headquarters Children, Youth and Families Program Office

Coordinate, through district CYF program offices, the provision of EPSDT case management activities as outlined in this agreement to all Medicaid eligible children for whom CYF has lead responsibility.

Ensure that all Medicaid eligibles for whom CYF has lead responsibility are issued a valid Medicaid ID Card.

Ensure that the recipient eligibility file for all Medicaid eligibles for whom CYF has lead responsibility is accurate and up-to-date.

#### V. State Health Office

Supervise the administration of screening services in HRS county public health units serving as Medicaid providers.

Ensure that HRS county public health units are provided procedural standards to assure uniformity in statewide program administration and timely scheduling of Medicaid eligibles for screening.

Ensure that HRS county public health units act as screening providers and coordinate activities with the district Medicaid program office.

Ensure that children referred to the WIC program are screened for eligibility and provided services as appropriate within existing program limitations.

Coordinate with other existing HRS county public health unit services (well-baby visits, school visits, maternal-infant care visits) to avoid unnecessary duplication of such services and maximize Title XIX services between HRS county public health units and the EPSDT program.

Ensure that Medicaid funded case management staff provide case management services in accordance with state and federal Title XIX regulations.

## VI. Headquarters Children's Medical Services Program Office

Supervise the administration of screening services in CMS clinics serving as Medicaid providers.

Ensure that Children's Medical Services clinics act as screening and treatment providers for CMS patients and coordinate EPSDT-related activities with the district Medicaid program office.

Ensure that targeted case management services are provided to eligible recipients as appropriate within a coordinated health care delivery system.

Provide medical consultation to the Medicaid office concerning the appropriate service provision for medically fragile children or children with special health care needs including organ transplantations.

### VII. Headquarters Developmental Services Program Office

Coordinate with other existing screening services in order to avoid duplication of such services under the EPSDT program and maximize Title XIX services between Developmental Services and the EPSDT program.

### VIII. Headquarters Alcohol, Drug Abuse and Mental Health Program Office

Coordinate with district ADM program offices to maximize the utilization of Medicaid funded substance abuse and mental health services through eligible providers for eligible recipients.

Provide technical assistance to district ADM program offices and substance abuse and mental health providers to improve the capacity, capability and expertise of providers to serve children within a coordinated system of health care delivery.

#### IX Confidentiality

The use or disclosure of information concerning applicants and recipients is restricted to purposes directly related to administration of the Medicaid State Plan.

EPSDT services including examination, diagnosis, treatment, outreach, informing, and assistance with transportation and scheduling appointments for services are considered activities directly related to State Plan administration.

Medical information is privileged and may only be released with the patient's permission.

Any agency or provider with a written interagency or provider agreement to perform EPSDT services which includes the activities of outreach and/or assistance with transportation or scheduling appointments is considered an extension or arm of the Medicaid agency and may be furnished, without the consent of the individual, such information as name, address and medical identification number, providing the following confidentiality requirements are met.

The following criteria specifies the conditions for release and use of information about applicants and recipients:

Information access is restricted to persons or agency representatives subject to legal sanctions or standards of confidentiality that are at least comparable to those of the Medicaid agency.

Release of names of applicants and recipients which may be used by outside sources (sources not under agreement with the agency to provide EPSDT services for recipients) is prohibited.

Written permission must be secured from a family or individual before responding to a request for information from an outside source.

Information may be exchanged when the agency is located within the State structure if the regulatory requirements for safeguarding information on applicants and recipients are met.

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Assistant Secretary for Alcohol, Drug Abuse	, Date
and Mental Health	
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Laure Clarke	4/8/91
Assistant Secretary	Date
for Medicaid	
Acting Assistant Secretary for Economic Services	4/19/91 Date
Assistant Secretary for Children, Youth, and Families	Date
Assistant Secretary	22/9/ Date
for Children's Medical Services	
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	/
Marcia Sall	5/1/91
Assistant Secretary	Date
for Developmental Services	•
Mfean	4/9/91
Deputy Secretary for Health	Date
State Health Office	
Suffield Klung	5/14/91
Acting Deputy Secretary for Programs	Date

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#### COOPERATIVE AGREEMENT

#### BETWEEN

### THE DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES THE MEDICAID PROGRAM OFFICE

#### AND

## THE DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY THE DIVISION OF VOCATIONAL REHABILITATION

This agreement is made between the Department of Health and Rehabilitative Services, Medicaid Program Office, and the Department of Labor and Employment Security, Division of Vocational Rehabilitation, to assure payment by Medicaid for Medicaid compensable medical services provided to Medicaid eligible individuals, and to assure referral by Vocational Rehabilitation to the appropriate agency for Medicaid eligibility determination for those who appear eligible.

Federal Regulations for Vocational Rehabilitation and for Title XIX (Medicaid) Programs require that the respective State Plans provide and describe cooperative working agreements. Medicaid funds may be used as a first-dollar resource for medical assistance provided to Medicaid eligible clients of the Vocational Rehabilitation agency. This agreement differentiates and describes responsibilities of each agency. The agencies have responsibility for statewide supervision of this cooperative program.

The Medicaid Office is designated as the administrative office for the Florida Title XIX (Medicaid) Program, a Federal/State Medical Care Program, provided for in the Social Security Act, which helps meet the cost of health care for those persons who meet the eligibility requirements. The Division of Vocational Rehabilitation has responsibility for administration of general Vocational Rehabilitation programs (excluding services for the blind) in the State of Florida. District Vocational Rehabilitation Offices provide vocational rehabilitation services, including medical and remedial treatment for those determined eligible for vocational rehabilitation.

- I. The Division of Vocational Rehabilitation Headquarters Office of the Department of Labor and Employment Security will:
  - A. Obtain individual provider numbers for each District Office;
  - B. Promulgate procedural regulations to District Vocational Rehabilitation Offices;
  - C. Provide the Medicaid Office with information requested by the Department of Health and Human Services;

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- D. Assure that reports showing the extent of medical services provided to Medicaid eligible individuals are maintained for continuity of care and avoidance of unnecessary repetition, and that these records shall be subject at all times to inspection, review or audit by duly authorized state personnel.
- E. Assure that a Program Specialist within the Bureau of Client Services is assigned with liaison responsibility.
- II. The District Offices of Vocational Rehabilitation of the Department of Labor and Employment Security will:
  - A. Assure that individuals who might be eligible for Medicaid are referred to the appropriate agency (local Economic Services, Aging and Adult Services or Social Security Office) for Medicaid eligibility determination.
  - B. When feasible, refer Medicaid eligible clients to participating Medicaid providers for treatment, offering freedom of choice; providers will seek payment directly from the Medicaid fiscal agent.
  - C. Will identify clients under 21 years of age in need of Medicaid sponsored treatment or remedial programming.
  - D. In case of emergency or other exceptional circumstance, make arrangements to provide medical assistance to Medicaid eligible individuals and receive the fee schedule reimbursement as a Medicaid provider by submission of a "Request for Payment" form to the Medicaid fiscal agent.
  - E. Follow the accepted procedures for billing purposes as outlined in the Medicaid Provider Handbooks.
  - F. Assure that all exchange of information will be subject to applicable State and Federal laws, agency regulations and policy, and will be accompanied by the written consent of the individual.
  - G. The District Program Administrator or a designated alternate will assure that a liaison individual is provided.
- III. The Medicaid Office of the Department of Health and Rehabilitative Services will:
  - A. Coordinate with the Economic Services and Aging and Adult Services Program Offices to assure that eligible individuals are informed of the availability of Medicaid services and that applications for Medicaid eligibility are processed in a timely manner with proof of Medicaid eligibility provided to all individuals determined eligible.